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APPLICANTS

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** CONTINUING DATA *****

RM *OK*

** FOREIGN APPLICATIONS *****

RM *OK*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature | STATE OR COUNTRY MN | SHEETS DRAWING 0 | TOTAL CLAIMS 41 | INDEPENDENT CLAIMS 5 |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged

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TITLE
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| FILING FEE RECEIVED 1296 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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